

# CALIFORNIA EMERGENCY MANAGEMENT AGENCY

<b>Grant Award No.</b>	<b>VS09010520</b>		
<b>Date of Site Visit</b>	<b>5/24/10</b>		
<b>Recipient Name</b>	<b>Tehama County</b>		
<b>Implementing Agency</b>	<b>Tehama County District Attorney</b>		
<b>Project Title</b>	<b>Victim/Witness VOCA Stimulus</b>		
<b>STATE (VWA) \$</b>		<b>VOCA \$15,435</b>	<b>VAWA \$</b>
<b>Grant Period 09/10</b>			
<b>Address 444 Oak Street, Red Bluff, CA 96080</b>			
<b>Project Director: Greg Cohen</b>			
<b>Financial Officer: Theresia Sweeney</b>			
<b>Project Coordinator: Linda Lucas</b>			
<b>PERSONS INTERVIEWED DURING SITE VISIT</b>			
<b>NAME</b>	<b>TITLE</b>	<b>TELEPHONE #</b>	
<b>Jeff Eldridge</b>	<b>Victim Witness Advcoate</b>	<b>530-527-4296</b>	
<b>Theresia Sweeney</b>	<b>Fiscal Officer</b>	<b>530-527-3053</b>	
<b>Linda Lucas</b>	<b>Project Coordinator</b>	<b>530-527-4296</b>	
<b>SIGNATURES</b>		<b>DATE</b>	
<b>Cal EMA Program Specialist:</b>			
<b>Cal EMA Section Chief:</b>			
<b>Project Representative</b>			

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Checklist Items	Yes	No	Comments
<b>A. ADMINISTRATIVE REVIEW</b>			
<b>1. Operational Documents – Review hard copy / verify the ability to access on line:</b>			
• Cal EMA Recipient Handbook (R.H.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
• The Approved Grant Award Agreement	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
• The RFA/RFP (supersedes the requirement of the R.H.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
• The Program Guidelines (supersedes the requirement of the R.H.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
• Is the project familiar with Office of Management and Budget (OMB) Circulars which govern their organization? Circulars may be found at <a href="http://www.whitehouse.gov/omb/circulars">www.whitehouse.gov/omb/circulars</a> .	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<b>2. Fidelity Bond – Community Based Organization (CBO) &amp; American Indian Organizations Only</b>			
• Obtain copy of required CBO bonding? <i>[R.H. Section 2161]</i>	<input type="checkbox"/>	<input type="checkbox"/>	n/a
• Does the bond show:			n/a
○ Bonding company name	<input type="checkbox"/>	<input type="checkbox"/>	n/a
○ Bond number	<input type="checkbox"/>	<input type="checkbox"/>	n/a
○ Description of coverage	<input type="checkbox"/>	<input type="checkbox"/>	n/a
○ Amount of coverage (50% of allocation)	<input type="checkbox"/>	<input type="checkbox"/>	n/a
○ Bond period	<input type="checkbox"/>	<input type="checkbox"/>	n/a
○ Grant award number	<input type="checkbox"/>	<input type="checkbox"/>	n/a
○ Bond include Form A (Employee Dishonesty) and Form B (Forgery Coverage)?	<input type="checkbox"/>	<input type="checkbox"/>	n/a
○ Is Cal EMA named on the bond as the beneficiary?	<input type="checkbox"/>	<input type="checkbox"/>	n/a
<b>3. Environmental Impact – CEQA Compliance <i>[R.H. Section 2153]</i></b>			
• Does the project have their CEQA documentation on file?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<b>4. Proof of Authority <i>[R.H. Section 1350]</i></b>			
• Does the project have a written authorization/resolution on file as required by the Grant Award Agreement? Ask for Copy	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Got copy
<b>5. Organizational Chart</b>			
• Review the organizational chart. Are all budgeted positions identified?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

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Checklist Items	Yes	No	Comments
<b>A. ADMINISTRATIVE REVIEW (Continued)</b>			
<b>6. Cal EMA Modification (CalEMA 2-223)</b>			
<ul style="list-style-type: none"> <li>• Review the purpose/preparation of Grant Award Modification [R.H. Section 7500]. Instruct the project staff on the procedure to obtain the most recent forms from Cal EMA website.                             <ul style="list-style-type: none"> <li>○ Budget changes</li> <li>○ Change in key personnel</li> <li>○ Adding/changing additional signers</li> <li>○ Change goals/objectives or activities</li> <li>○ Address change</li> <li>○ Other</li> </ul> </li> </ul>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No modifications were needed on this grant
<b>7. Personnel Policies</b>			
<ul style="list-style-type: none"> <li>• Does the project staff have access to written personnel policies as required? [R.H. Section 2130]</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	In the personnel file
<ul style="list-style-type: none"> <li>• Do policies include:                             <ul style="list-style-type: none"> <li>○ Maintenance of personnel files for all paid and volunteer staff including job applications, salaries, benefits, and current job duties/descriptions?</li> <li>○ A current Drug Free Workplace policy statement on file signed by the employee [R.H. Section 2152]?</li> <li>○ Work hours</li> <li>○ Compensation rates</li> <li>○ Overtime</li> </ul> </li> <li>• Did the Board approve the agency's current personnel policy?</li> </ul>	<input checked="" type="checkbox"/>          <input checked="" type="checkbox"/>	<input type="checkbox"/>	
<b>8. Functional Timesheets</b>			
<ul style="list-style-type: none"> <li>• Does the project use functional timesheets for each grant funded position less than 1 FTE? OR Time Study Allocation plan updated within the last 2 years? [R.H. Section 11331]</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<ul style="list-style-type: none"> <li>• Are timesheets (paid staff &amp; volunteer) signed by staff &amp; approved by supervisor? (Review timesheets to ensure they are signed by the staff and supervisor).</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<b>9. Duties of Financial Officer and Bookkeeper</b>			
<ul style="list-style-type: none"> <li>• Are the duties of the financial officer and bookkeeper separate to ensure no one person has complete authority over a financial transaction?</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<ul style="list-style-type: none"> <li>○ Name of individual (or title) who approves purchases</li> <li>○ Name of individual (or title) who writes checks</li> <li>○ Name of individual(s) (or title(s)) who signs checks</li> </ul>			Theresia Sweeney F.O. Auditor Auditor

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Checklist Items	Yes	No	Comments
<b>A. ADMINISTRATIVE REVIEW (Continued)</b>			
<b>10. Source Documentation</b>			
• Does the project maintain a record-keeping system which will accurately support costs claimed on Report of Expenditure and Request for Funds (CalEMA 2-201)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
• Does the project maintain an accurate inventory log of equipment purchased with grant funds?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<b>11. Project Expenditures</b>			
• Does the project's expenditure rate commensurate with the elapsed period of the grant?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Does not need an extension
• Are the project's expenditures being made in accordance with the terms of the Grant award Agreement?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
• Does the project need to submit a Grant Award Modification Request (CalEMA 2-223)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
• Is the project up-to-date with the submission of CalEMA 2-201	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<b>12. Match Requirements</b>			
• Does the project have a match requirement?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
• Is the project meeting the match requirement?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	They will have it spent by 6/30/10
• Review the supporting documentation to substantiate cash or in-kind match.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Viewed
<b>13. EEO Policy</b>			
• Go over EEO Checklist (separate document attached)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<b>B. PROGRAMMATIC REVIEW - GENERAL</b>			
<b>1. Program Goals and Objectives</b>			
• Review the goals and objectives of the program and the programmatic requirements of the Grant Award Agreement. Is the project meeting the programs and objectives?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	This program was to maintain this person in their job.
• Does the project staff need to submit CalEMA 2-223 to modify their grant goals/objectives?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<b>2. Progress Report</b>			
• Discuss and review the programmatic Progress Report Requirements. Are the reports being submitted timely?	<input type="checkbox"/>	<input type="checkbox"/>	Not developed yet for VOCA Stimulus

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Checklist Items	Yes	No	Comments
<b>B. PROGRAMMATIC REVIEW – GENERAL (Continued)</b>			
<b>3. Source Documentation - Programmatic</b>			
• Is the project maintaining a record keeping and data collection process that will accurately support the project's reported data on the Progress Report form?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
• Review the project's file system and adapt collection process			They keep track on an intake sheet – stat services. I obtained a copy of how they record services.
<b>4. Operational Agreements</b>			
• Does the project have current Operational Agreements as required by the Grant award Agreement?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
• Current Operational Agreements on file with:			
(1) Sexual Assault (mandatory)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Rape Crisis Intervention
(2) Domestic Violence (mandatory)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Alternative to Violence
(3) Child Services (mandatory)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Tehama County Social Services
(4) Law Enforcement (mandatory)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Tehama Sheriff Dept
(5) Probation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Tehama Probation
(6) District Attorney	<input checked="" type="checkbox"/>	<input type="checkbox"/>	They are under the DA office
(7) Other	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Corning PD
<b>4. Project Staff Duties</b>			
• Interview project staff and discuss their duties and the relationship to the grant. Are employees performing duties as stated in the Grant Award Agreement and job description/duty statement?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

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Checklist Items	Yes	No	Comments
<b>SUPPLEMENTAL PROGRAMMATIC REVIEW</b>			
<b>1. MANDATORY SERVICES</b>			
<b>a. Crisis Intervention</b>			
(1) Provide in person/telephone contacts	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(2) Provide crisis intervention and arrange for needed services	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<b>b. Emergency Assistance</b>			
(1) Arrange emergency assistance within the first 24 hours after initial contact	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(2) Written procedures in place for disbursing funds	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No Emergency Funds
(3) OA(s) on file with service providers (i.e. shelters)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<b>c. Resource and Referral Assistance</b>			
(1) Provide non-emergency referrals	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(2) OA(s) on file with service providers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<b>d. Direct Counseling</b>			
(1) Provide in person or telephone guidance and/or emotional support	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Information Referrals
(2) If counseling is provided, it is at a level that does not require a licensed professional	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
(3) If counseling is referred, OA(s) on file with service providers	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<b>e. Victims of Crime Claims</b>			
(1) Assist clients in preparing applications for compensation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(2) Advocate is aware their role does not include determination of eligibility	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(3) Is a joint Powers unit locally located	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Shasta County
<b>f. Property Return</b>			
(1) Assist in the return of property held as evidence	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(2) If property cannot be returned, an explanation is provided	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

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Checklist Items	Yes	No	Comments
<b>SUPPLEMENTAL PROGRAMMATIC REVIEW (Continued)</b>			
<b>1. MANDATORY SERVICES (Continued)</b>			
<b>g. Orientation to the Criminal Justice System</b>			
(1) Provide information on the location, procedures, and functions of local criminal justice agencies	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(2) Written material/brochures are available in languages appropriate to local ethnic needs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Would like to work on Spanish language i.e Marcy's Law
<b>h. Court Escort</b>			
(1) Provide physical accompaniment during court appearances	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(2) Provide physical accompaniment during interviews with law enforcement and prosecution	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<b>i. Presentations and Training for Criminal Justice Agencies</b>			
(1) Conduct informational presentations regarding resources available through V/W Centers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(2) Conduct informational presentations explaining the rights and needs of victims	<input checked="" type="checkbox"/>	<input type="checkbox"/>	They would like to expand on this
<b>j. Public Presentations and Publicity</b>			
(1) Promote public awareness of V/W services through public media	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(2) Conduct presentations to victim service organizations and community groups	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(3) Participate in Victims' Rights Week	<input checked="" type="checkbox"/>	<input type="checkbox"/>	They had a information table and got food and drinks donated about 30 – 40 people attended
<b>k. Case Status/Case Disposition</b>			
(1) Advise victim of the progress and disposition of case	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(2) Assist victim with preparing Victim Impact Statements	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<b>l. Notification of Family/Friends</b>			
(1) Notify victim's relatives and/or friends of the occurrence of the crime	<input checked="" type="checkbox"/>	<input type="checkbox"/>	If they request it
<b>m. Employer Notification</b>			
(1) Notify employer that client was a victim/witness to a crime	<input checked="" type="checkbox"/>	<input type="checkbox"/>	If they request it

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(2) Encourage employer to minimize any loss of pay or other benefits	<input checked="" type="checkbox"/>	<input type="checkbox"/>	If they request it
<b>Checklist Items</b>	<b>Yes</b>	<b>No</b>	<b>Comments</b>
<b>SUPPLEMENTAL PROGRAMMATIC REVIEW (Continued)</b>			
<b>1. MANDATORY SERVICES (Continued)</b>			
<b>n. Restitution</b>			
(1) Assist in obtaining restitution	<input checked="" type="checkbox"/>	<input type="checkbox"/>	In cases that are theirs
(2) Provide the Probation Department, District Attorney, and Court with information relevant the victim's losses prior to the imposition of sentencing	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<b>2. OPTIONAL SERVICES</b>			
(1) Employer Intervention	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(2) Creditor Intervention	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(3) Child Care Assistance	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
(4) Witness Notification	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(5) Funeral Arrangements	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(6) Crime Prevention Information	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(7) Witness Protection	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(8) Temporary Restraining Order (TRO) Assistance	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Referral – for criminal protective orders
(9) Transportation Assistance	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(10) Court Waiting Area	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<b>3. AGENCY ORGANIZATION</b>			
<b>a. Facility</b>			
(1) V/W Center is open during normal business hours	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(2) Waiting Room	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(3) Private Interview Room	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<b>b. Personnel &amp; Organization</b>			
(1) Reporting lines of Authority are consistent with the Project Contact Information form	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(2) Authorization for additional signature authority is current	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(3) Evidence of completion of 40 hour Entry-Level Training	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Viewed both copies



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<b>Checklist Items</b>	<b>Yes</b>	<b>No</b>	<b>Comments</b>
<b>SUPPLEMENTAL PROGRAMMATIC REVIEW (Continued)</b>			
<b>b. Personnel &amp; Organization (Continued)</b>			
(4) Evidence of completion of Advance Training, if applicable	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(5) Evidence of completion of Coordinator's Training, if applicable	<input type="checkbox"/>	<input checked="" type="checkbox"/>	n/a
(6) Volunteers utilized as required	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Volunteers counted in VW grant
(7) Utilize functional time sheets	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<b>Additional Comments / Notes:</b>			



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Checklist Items	Yes	No	Comments
<b>SUPPLEMENTAL PROGRAMMATIC REVIEW -- STIMULUS GRANTS ONLY</b>			
(1) Does the timesheets for staff charged to VS grant match Hours Worked by Position monthly reports?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Refelected in VOCR time sheet and 201 specific to this grant
(2) Does the timesheets for staff charged to RV grant match Hours Worked by Position monthly reports?	<input type="checkbox"/>	<input type="checkbox"/>	N/A
(3) Does the Grantee have documentation supporting new or retained position(s) claimed in the VS grant?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(4) Does the Grantee have documentation supporting new or retained position(s) claimed in the RV grant?	<input type="checkbox"/>	<input type="checkbox"/>	N/A
(5) Does the Grantee have receipt documentation showing brochures or other purchased items (computers, monitors, etc.) were from "Buy America" business concerns?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<b>Additional Comments / Notes:</b>			